

Minutes of the meeting of the Audit and Compliance Committee of the Board of Directors of the Cook County Health and Hospitals System held Thursday, September 20, 2018 at the hour of 9:00 A.M. at 1900 W. Polk Street, in the Second Floor Conference Room, Chicago, Illinois.

**I. Attendance/Call to Order**

Acting Chair Reiter called the meeting to order.

Present: Acting Chair Robert G. Reiter, Jr. and Directors Ada Mary Gugenheim and Mary B. Richardson-Lowry (Substitute Member) (3)

Director David Ernesto Munar

Absent: Chair Hon. Jerry Butler and Director Layla P. Suleiman Gonzalez, PhD, JD (2)

Additional attendees and/or presenters were:

Cathy Bodnar – Chief Corporate Compliance and Privacy Officer

Jeff McCutchan –General Counsel

Deborah Santana – Secretary to the Board

Tom Schroeder – Director of Internal Audit

John Jay Shannon, MD – Chief Executive Officer

Dianne Willard – CCHHS Compliance Officer

**II. Public Speakers**

Acting Chair Reiter asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

**III. Report from Chief Corporate Compliance and Privacy Officer (Attachment #1)**

Cathy Bodnar, Chief Corporate Compliance and Privacy Officer, provided an overview of the information contained in the Report. The Committee reviewed and discussed the information.

The report included information on the following subjects:

- Corporate Compliance Overview
  - Mission & Vision – Action: Review and Approve
  - Organizational Chart with Introduction
- Provider Metrics
- Fraud, Waste and Abuse (FWA) Metrics
- Appendix

**IV. Action Items**

**A. Review and approve amendments to the CCHHS Corporate Compliance Mission Statement and Vision Statement (Attachment #2)**

Ms. Bodnar provided an overview of the proposed amendments. During the discussion of the information, Director Gugenheim recommended that the word “compliance” be included in the CCHHS Corporate Compliance Mission Statement as follows: Increasing compliance awareness through education and training.

Director Gugenheim, seconded by Director Richardson-Lowry, moved to approve the proposed amendments to the CCHHS Corporate Compliance Mission Statement and Vision Statement, with the additional change as discussed. THE MOTION CARRIED UNANIMOUSLY.

**B. Minutes of the Audit and Compliance Committee Meeting, June 22, 2018**

Director Gugenheim, seconded by Director Richardson-Lowry, moved to accept the minutes of the Audit and Compliance Committee Meeting of June 22, 2018. THE MOTION CARRIED UNANIMOUSLY.

**C. Any items listed under Sections IV and V**

**V. Closed Meeting Items**

**A. Report from Director of Internal Audit**

**B. Discussion of Personnel Matters**

Director Gugenheim, seconded by Director Richardson-Lowry, moved to recess the open meeting and convene into a closed meeting, pursuant to the following exceptions to the Illinois Open Meetings Act: 5 ILCS 120/2(c)(1), regarding “the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body or legal counsel for the public body, including hearing testimony on a complaint lodged against an employee of the public body or against legal counsel for the public body to determine its validity,” and 5 ILCS 120/2(c)(29), regarding “meetings between internal or external auditors and governmental audit committees, finance committees, and their equivalents, when the discussion involves internal control weaknesses, identification of potential fraud risk areas, known or suspected frauds, and fraud interviews conducted in accordance with generally accepted auditing standards of the United States of America.” THE MOTION CARRIED UNANIMOUSLY

Acting Chair Reiter declared that the closed meeting was adjourned. The Committee reconvened into the open meeting.

**VI. Adjourn**

As the agenda was exhausted, Acting Chair Reiter declared the meeting  
ADJOURNED.

Respectfully submitted,  
Audit and Compliance Committee of the Board of Directors of the  
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Robert G. Reiter, Jr., Acting Chair

Attest:

XXXXXXXXXXXXXXXXXXXXXXXXXXXX  
Deborah Santana, Secretary

Requests/Follow-up:

Request: Request to include the word “compliance” in the CCHHS Corporate Compliance Mission  
Statement as follows: Increasing compliance awareness through education and training. Page 2

Cook County Health and Hospitals System  
Minutes of the Audit and Compliance Committee Meeting  
September 20, 2018

ATTACHMENT #1



# AUDIT & COMPLIANCE COMMITTEE OF THE BOARD OF DIRECTORS

## Corporate Compliance Report

September 20, 2018



# Meeting Objectives



- Corporate Compliance Overview
  - Mission & Vision
    - ➔ Action: Review and Approve
  - Organization Chart with Introductions
- Metrics
  - CCHHS Provider
  - CountyCare Health Plan

# CCHHS Corporate Compliance Mission Statement

The Office of Corporate Compliance ~~Program~~ upholds the mission, vision, and core values ~~goals~~ of Cook County Health & Hospitals System (CCHHS) by ~~establishing and supporting a system-wide culture of honesty and respect to guide everyone's actions by~~

- Developing standards to guide everyone affiliated with CCHHS to "Do the Right Thing"
- Increasing awareness through education and training
- Promoting collaboration, honest behavior, ~~and~~ mutual respect, and professional responsibility

~~through education, awareness, and shared accountability that promotes to support~~ compliance with applicable laws, regulations, and system-wide policies.



# CCHHS Corporate Compliance Mission Statement

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# CCHHS Corporate Compliance Vision Statement

To ensure safeguards are in place for our patients, health plan members, health plan providers, the residents of the county of Cook, and our workforce members, ~~staff, and the public at large,~~ the Corporate Compliance Program will be a resource to everyone affiliated<sup>1</sup> with and cared for by Cook County Health & Hospitals System.

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<sup>1</sup> For the purposes of this statement, “affiliated” is defined as all patients, health plan members, health plan providers, the residents of the county of Cook, and workforce members that include employees, medical staff, house staff, Board members, volunteers, students, partners, consultants, agency personnel, and vendors.



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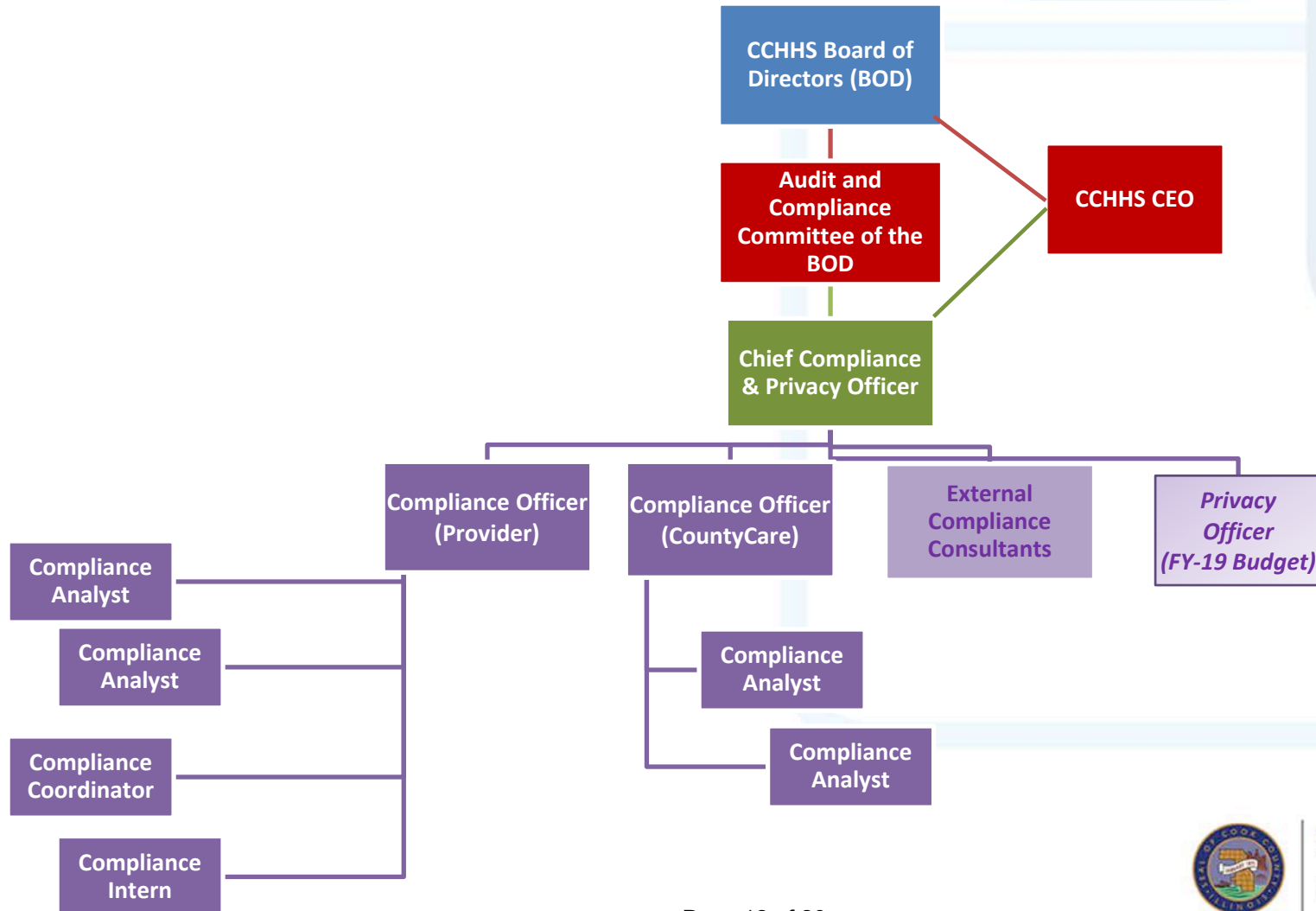
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# Request to Approve Updated Corporate Compliance Mission & Vision



# The Corporate Compliance Team

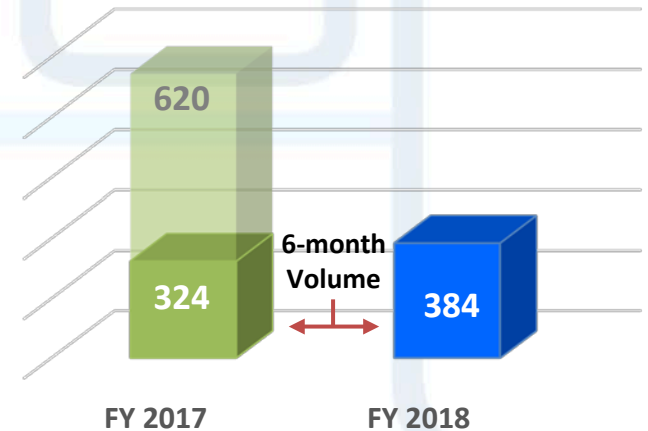
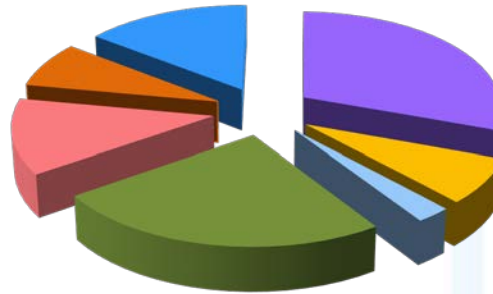


# Provider Metrics: Issue Breakdown by Category

## December 2017 – May 2018

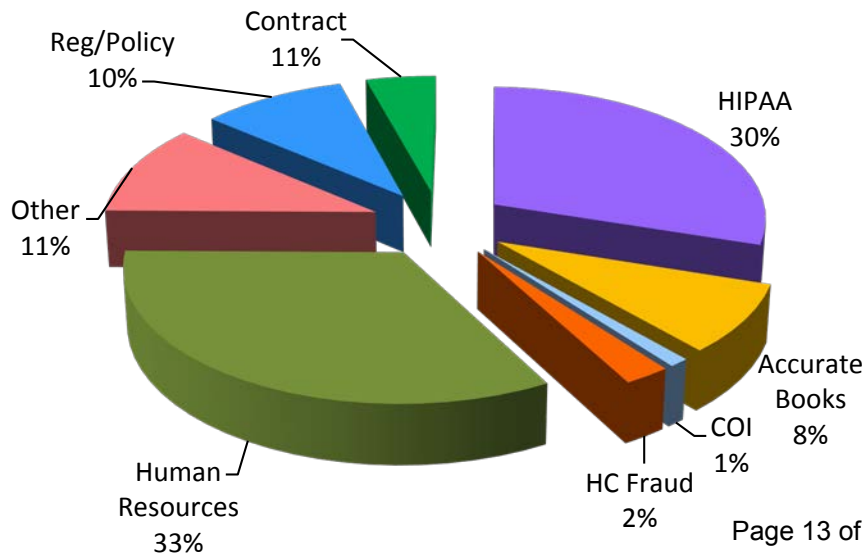
Total Issues = 384

HIPAA	116	30%
HR	95	25%
Reg/Policy	57	15%
Other	48	12%
Contract	29	8%
Accurate Books	29	8%
COI	10	2%



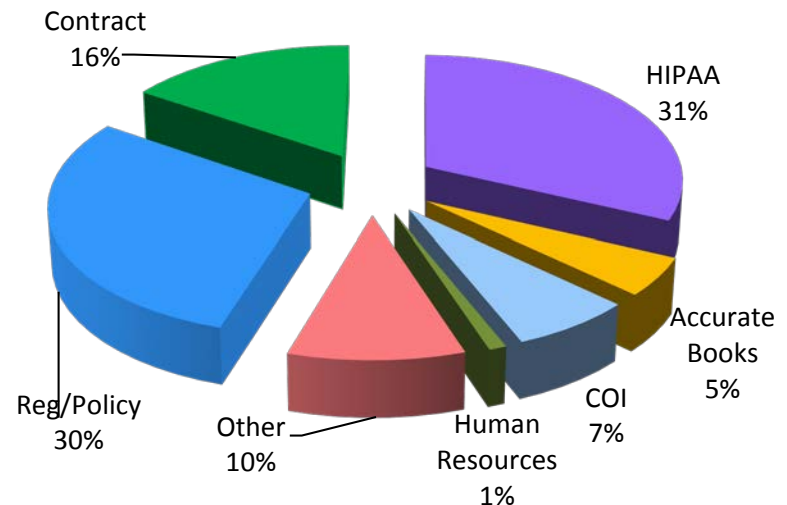
### Reactive Issues = 283 or 74%

Notification or allegation of an issue that impacts compliance, requiring investigation.



### Proactive Issues = 101 or 26%

Requesting guidance prior to engaging in or undertaking an activity that could impact compliance, requiring research.



# Fraud, Waste and Abuse Metrics

CountyCare Fraud, Waste and Abuse (FWA) metrics are tracked by  
State Fiscal Year (S-FY) not County Fiscal Year  
 S-FY 2018 is July 1, 2017 – June 30, 2018

Member Allegations	S-FY17	S-FY18 Q1	S-FY18 Q2	S-FY18 Q3	S-FY18 Q4
Total <u>Member</u> Allegations	18	—	2	3	1
Provider Allegations	S-FY17	S-FY18 Q1	S-FY18 Q2	S-FY18 Q3	S-FY18 Q4
Total <u>Provider</u> Allegations	34	15	5	27	20
→ <b>Grand Total</b>	<b>52</b>	<b>15</b>	<b>7</b>	<b>30</b>	<b>21</b>
FWA Issues Received Per 1,000 members	.09/1000	.1/1000	.05/1000	.09/1000	.06/1000

In S-FY 2018,  
 CountyCare referred  
**14** cases to the HFS  
 OIG for possible fraud,  
 waste or financial  
 misconduct.

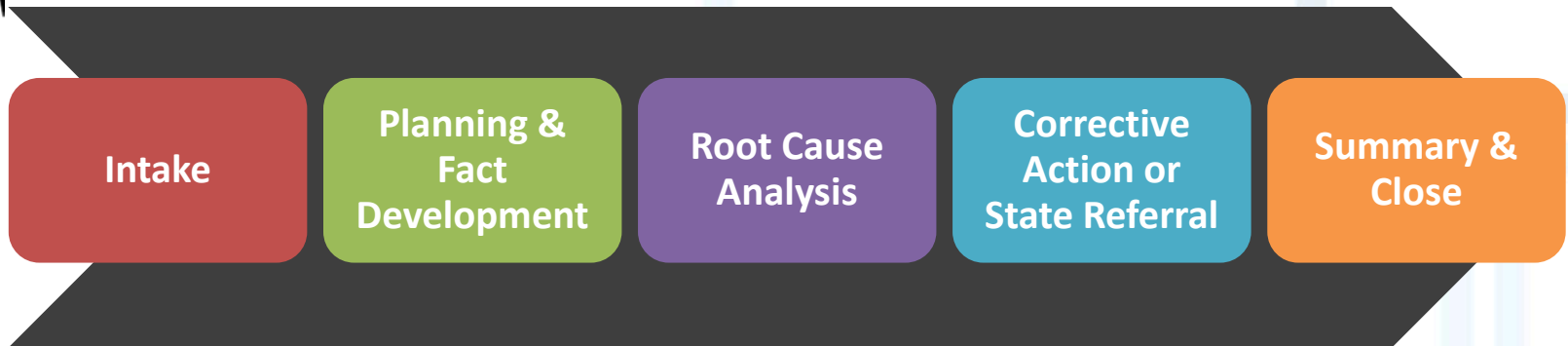
SIU Algorithms as of S-FY18 Q4	Providers	Members
Medically Unlikely Edits	39	1,714
DRG Duplications	7	11
Multiple E&M Paid Same Day	59	2,176
Hospital Transfer Billed as Discharge	39	100
New Pt CPT Paid After Prof Service	87	5,480
Professional vs. Surgical Cross-Code	5	312
Payments for Add-on No Base Code	61	1,184
Age Related Codes	7	27
Prof Global Charge Member in Facility	79	9,275
Inpatient Only Procedures	72	296
Procedure to Procedure	5	48
→ <b>Grand Total</b>	<b>460</b>	<b>20,623</b>



# Appendix



# Corporate Compliance Investigation Path





# The Investigation Path: Intake

Each investigation begins with intake. Intake involves the notification and collection of enough data to begin the investigatory process. CountyCare's modes of intake of allegations of a potential case that is identified as fraud, waste, and/or abuse are as follows:

- Hotline call
- Customer Service call
- Algorithms identifying aberrant trends in billing
- Data mining
- Report via email or direct call from staff, provider, or subcontractor
- In-person meeting or reporting



Intake

# The Investigation Path: Planning

Our PIUs plan after a report or hotline call is received. It's determining who needs to be contacted, what data range must be researched, what reports need to be obtained or run, and what facts need to be developed.

At the core of an investigation are facts. In analyzing the relevant facts, our Program Integrity Units address the following:

- The starting point/root cause of the issue
- Applicable rules and regulations that govern this area
- Conduct telephone interviews, an on-site visit, or a desk audit



Planning &  
Fact  
Development

# The Investigation Path: Root Cause Analysis

Then, CountyCare's PIUs conduct a Root Cause Analysis to determine the origin of the reported issue.

A benefit of a Root Cause Analysis being performed is to ensure that issues arising from hotline calls or reports are not only investigated to their full potential, but that the source of the suspected fraud, waste, and/or abuse is identified, corrected, and prevented from occurring in the future.



Root Cause  
Analysis

# The Investigation Path: Corrective Action

Once an investigation is complete and a root cause analysis has been conducted, corrective action helps to ensure mitigation of future occurrences of suspected fraud, waste, and/or abuse by a practitioner, provider, or member.

This can involve:

- Collection of overpayments from provider or held from future payments
- Provider education and remediation
- Payment Suspension/Withhold or termination from CountyCare's network



If it's determined that an investigation warrants referral to Illinois HFS-OIG, CountyCare Compliance works with its PIUs to gather all facts, data, and summaries to submit a referral to HFS-OIG via secure online portal.

Corrective  
Action or  
State Referral

# The Investigation Path: Close

A summary of the investigation is reviewed once its foundational facts, root cause analysis, and proposed corrective action have been established.

**COOK COUNTY HEALTH & HOSPITALS SYSTEM**  
**CCHHS**

**Initiation Date:**  
09/29/2017

**Issue Description:**  
Notification of a dermatologist sentenced to probation for health care fraud of which, it is reported, the individual will spend time at Stroger Hospital performing technician functions.

**Issue Detail:**  
Review of "Google Alerts" to find a dermatologist, Dr. Omeed Memar, sentenced to three years of probation, during which he must work 25 hours per week, unpaid, doing community service, most likely as a technician for a doctor that does facial reconstruction surgery at John H. Stroger Jr. Hospital of Cook County. (link attached)

In the northern district of Illinois, Dr. Omeed Memar was convicted of healthcare fraud. Healthcare fraud results in sanctioning.

**Investigations for Activity:**  
Cross-check of employee listing through Human Resources (actively employed and terminated).  
Cross-check of voluntary providers and other workforce members. Search result determined the individual identified was not affiliated with CCHHS in any capacity prior to his conviction or at this time.

**Research:**  
Social Security Act, Sections 1128 and 1128A  
89 Illinois Administrative Code, Section 140.16  
42 CFR 1001.1901  
42 CFR 1003.102(a)(2)  
State of Illinois Contract between the Department of HealthCare and Family Services and County of Cook, Illinois, by and through its Cook County Health and Hospitals System for  
County Managed Care Community Network (2018-24-201)

**Close:**  
09/29/2017

Summary &  
Close



**COOK COUNTY HEALTH & HOSPITALS SYSTEM**  
**CCHHS**

Cook County Health and Hospitals System  
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ATTACHMENT #2

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